

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: D. Paul

Attorney Docket No: GMI.0009.US

Application No.: 10/762,533

Group Art Unit: 3732

Filed: January 23, 2004

Examiner: P. Philogene

For: SPINE STABILIZATION SYSTEM

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OCT 14 2004

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2. Fee Transmittal (1 page)
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4. Response to Non-Final Office Action (10 pages)
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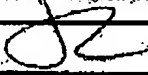
  
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John P. Mulgrew, Reg. No. 47,809


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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10762,533
		Filing Date	January 23, 2004
		First Named Inventor	D. Paul
		Art Unit	3732
		Examiner Name	P. Philogene
Total Number of Pages in This Submission	14	Attorney Docket Number	

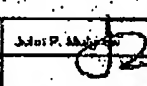
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Certificate of Transmission 2. Credit Card Authorization
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Signature	
Date	October 13, 2004

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Signature	
Date	October 13, 2004

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<b>FEE TRANSMITTAL for FY 2005</b>		<i>Complete if Known</i>																																																																																																																																																					
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Name (Print/Type)	John P. Maguire	Registration No. (Attorney/Agent)	47,506																																																																																																																																																				
Signature		Telephone	(703) 828-8993																																																																																																																																																				
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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application of: D. PAUL

Attorney Docket No: GML6009.US

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For: SPINE STABILIZATION SYSTEM

**RESPONSE TO NON-FINAL OFFICE ACTION**

Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

In response to the office action mailed July 13, 2004, Applicants submit the following amendments and remarks for entry and consideration during the examination of the above-identified application.

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